

OMB NO. 1124-0002; Expires February 28, 2014

Supplemental Statement

Pursuant to the Foreign Agents Registration Act of 1938, as amended

		For Six Month Pe	eriod Ending	6/30/2012 (Insert date)		
	·	ı-	REGISTR	ANT		
1. (a) Na	me of Registrant		(b) Regist	ration No.		
	. MAARTEN TOURIST OFFICE		5294	·		
(c) Bu	siness Address(es) of Registrant	•				
C/(O JANOVER LLC	V				
	5 THIRD AVE, STE 10-02					
NE	W YORK, NY 10022					,
				•		75
						Jac NSD/
2. Has the	ere been a change in the informa	ion previously fu	ırnished in co	nnection with the	following?	201/DES/JUL 19
(a) If	f an individual:		,			
	l) Residence address(es)	Yes 🗌	No 🖂			19 年間
•	2) Citizenship	Yes 🗆	No 🗆			P (0)
(.	3) Occupation	Yes 🗆	No 🗆	•		
(b) I	f an organization:					M 9: 20
. `	l) Name	Yes 🗆	No ⊠			Ö
(2	2) Ownership or control	Yes 🗌	No 🗵	•		
(.	3) Branch offices	Yes 🗷	No 🗆			,
, ,	xplain fully all changes, if any, i HE ORGANIZATION USED TO HA				807. NEW YORK, NY	10017.
	HE ST. MAARTEN TOURIST OFFI	, ,				
	MAILING ADDRESS.	CE 03E3 C/O 1AN	OVEN LLC, O	33 MIND AVE. NEV	V TORK, NT 100227	13 113 0.3.
	•					
	•					
		•				
	IF THE REGISTRANT	'IS AN INDIVI	DUAL, OMI	T RESPONSE TO	DITEMS 3, 4, ANI	D 5(a).
2 If you	have previously filed Exhibit C ¹ .					
-	les □ No ⊠	state whether an	y changes the	Tem nave occurred	i during tins o mont	n reporting period.
If yes,	have you filed an amendment to	the Exhibit C?	Yes 🗌	No 🗆		
If no, p	please attach the required amend	ment.	*-			•

The Exhibit C, for which no printed form is provided, consists of a true copy of the charter, articles of incorporation, association, and by laws of a registrant that is an organization. (A waiver of the requirement to file an Exhibit C may be obtained for good cause upon written application to the Assistant Attorney General, National Security Division, U.S. Department of Justice, Washington, DC 20530.)

Yes □	No ⊠	•		
If yes, furnish the follow	ing information:			
Name		Position	Date Con	nection Ended
•	·			
	•		•	
b) Have any persons becom Yes	. e partners, officers, directors or sim No ⊠	nilar officials during this 6 mo	nth reporting period	?
If yes, furnish the follow	ving information:			•
Name	Residence Address	Citizenship	Position	Date Assumed
,				
•				
		•		
				·
	Item 4(b) rendered services directly	y in furtherance of the interest	ts of any foreign prin	ncipal?
Yes 🗌	No 🗵	•		
If yes, identify each sucl	h person and describe the service rea	ndered.		
	·	•	•	
	•			
secretarial, or in a related	the registrant directly in furtherance of or similar capacity? Yes Residence Address	No ⊠ Citizenship	Position	Date Assumed
		•	•	
	•		·	
*				
			•	
	•			
connection with the regi	individuals, who have filed a short f strant during this 6 month reporting		rminated their emplo No ⊠	oyment or .
connection with the regi	strant during this 6 month reporting ving information:	period? Yes 🗆	No ⊠	•
connection with the regi	strant during this 6 month reporting ving information:		No ⊠	oyment or te Terminated
connection with the regi	strant during this 6 month reporting ving information:	period? Yes 🗆	No ⊠	•
connection with the regi	strant during this 6 month reporting ving information:	period? Yes 🗆	No ⊠	•
connection with the regi	strant during this 6 month reporting ving information:	period? Yes 🗆	No ⊠	•
connection with the regi If yes, furnish the follow Name d) Have any employees or i	strant during this 6 month reporting ving information: Po individuals, who have filed a short f	g period? Yes sition or Connection	No ⊠	te Terminated
connection with the regi If yes, furnish the follow Name d) Have any employees or i principal during this 6 m	strant during this 6 month reporting ving information: Po individuals, who have filed a short fronth reporting period? Yes	period? Yes sition or Connection form registration statement, ter	No ⊠	te Terminated
connection with the regi If yes, furnish the follow Name d) Have any employees or i principal during this 6 m If yes, furnish the follow	strant during this 6 month reporting ving information: Po individuals, who have filed a short facility information: Ving information:	period? Yes period? Yes position or Connection form registration statement, ten No No	No ⊠ Da minated their conne	te Terminated ection with any foreig
connection with the regi If yes, furnish the follow Name d) Have any employees or i principal during this 6 m	strant during this 6 month reporting ving information: Po individuals, who have filed a short fronth reporting period? Yes	period? Yes sition or Connection form registration statement, ter	No ⊠ Da minated their conne	te Terminated
connection with the regi If yes, furnish the follow Name d) Have any employees or i principal during this 6 m If yes, furnish the follow	strant during this 6 month reporting ving information: Po individuals, who have filed a short facility information: Ving information:	period? Yes period? Yes position or Connection form registration statement, ten No No	No ⊠ Da minated their conne	te Terminated ection with any foreig
connection with the regi If yes, furnish the follow Name d) Have any employees or i principal during this 6 m If yes, furnish the follow	strant during this 6 month reporting ving information: Po individuals, who have filed a short facility information: Ving information:	period? Yes period? Yes position or Connection form registration statement, ten No No	No ⊠ Da minated their conne	te Terminated ection with any foreig
connection with the regi If yes, furnish the follow Name d) Have any employees or i principal during this 6 m If yes, furnish the follow	strant during this 6 month reporting ving information: Po individuals, who have filed a short facility information: Ving information:	period? Yes period? Yes position or Connection form registration statement, ten No No	No ⊠ Da minated their conne	te Terminated ection with any foreig

If no, list names of persons who have not filed the required statement.

II - FOREIGN PRINCIPAL

If yes, furnish the following i					
Foreign Principal				Date of Termina	ation
•	·				
				•	
·					
Have you acquired any new to If yes, furnish th following in		(s) ² during this 6 r	nonth reporting p	period? Yes	No ⊠
Name and Address of Foreig	n Principal(s)			Date Acquire	d .
	,				·
•		•			
				•	
				•	
		·	. ,		
	n Items 7 and 8, if	f any, list foreign	principal(s) ² who	om you continued to repres	sent during the 6 m
reporting period.		f any, list foreign	principal(s) ² who	om you continued to repres	sent during the 6 m
	EAU	f any, list foreign	principal(s) ² who	om you continued to repres	sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR	EAU	f any, list foreign	principal(s) ² who	om you continued to repres	sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR	EAU	f any, list foreign	principal(s) ² who	om you continued to repres	sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR	EAU	f any, list foreign	principal(s) ² who	om you continued to repres	sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR	EAU	f any, list foreign	principal(s) ² who	om you continued to repres	sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR ST. MAARTEN, NETHERLAND	EAU DS ANTILLES	· .			sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR ST. MAARTEN, NETHERLAND). (a) Have you filed exhibits	EAU DS ANTILLES for the newly acq	uired foreign prin			sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR ST. MAARTEN, NETHERLAND (a) Have you filed exhibits Exhibit A ³	TEAU DS ANTILLES for the newly acq Yes □	uired foreign prin No ⊠			sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR ST. MAARTEN, NETHERLAND (a) Have you filed exhibits	for the newly acq	uired foreign prin			sent during the 6 m
reporting period. ST. MAARTEN TOURIST BUR ST. MAARTEN, NETHERLAND O. (a) Have you filed exhibits Exhibit A ³ Exhibit B ⁴ If no, please attach the re-	for the newly acq Yes Yes equired exhibit.	uired foreign prin No ⊠ No ⊠	ncipal(s), if any, l	listed in Item 8?	
reporting period. ST. MAARTEN TOURIST BUR ST. MAARTEN, NETHERLAND (a) Have you filed exhibits Exhibit A ³ Exhibit B ⁴ If no, please attach the re (b) Have there been any characterists	for the newly acq Yes Yes equired exhibit.	uired foreign prin No ⊠ No ⊠ bits A and B previ	ncipal(s), if any, l	listed in Item 8? ny foreign principal whom	
ST. MAARTEN TOURIST BUR ST. MAARTEN, NETHERLAND O. (a) Have you filed exhibits Exhibit A ³ Exhibit B ⁴ If no, please attach the re	for the newly acq Yes Yes equired exhibit. anges in the Exhibits is month period?	uired foreign prin No ⊠ No ⊠ bits A and B previ	ncipal(s), if any, l	listed in Item 8?	

 ² The term "foreign principal" includes, in addition to those defined in section 1(b) of the Act, an individual organization any of whose activities are directly or indirectly supervised, directed, controlled, financed, or subsidized in whole or in major part by a foreign government, foreign political party, foreign organization or foreign individual. (See Rule 100(a) (9)). A registrant who represents more than one foreign principal is required to list in the statements he files under the Act only those principals for whom he is not entitled to claim exemption under Section 3 of the Act. (See Rule 208.)
 3 The Exhibit A, which is filed on Form NSD-3 (Formerly CRM-157) sets forth the information required to be disclosed concerning each foreign principal.
 4 The Exhibit B, which is filed on Form NSD-4 (Formerly CRM-155) sets fourth the information concerning the agreement or understanding between the registrant and the foreign principal.

III - ACTIVITIES

11.	During this 6 month report named in Items 7, 8, or 9			ny activities for or res s ⊠ No □		to any foreign prin	cipal
	If yes, identify each foreig	gn principal and o	describe in full deta	ail your activities and	l services:		
	SEE ATTACHED						
						•	
		•					
			•	•			
						•	
				•			
12.	During this 6 month report Yes \(\square\) No	rting period, have	e you on behalf of a	any foreign principal	engaged in political	activity ⁵ as define	d below?
	If yes, identify each such the relations, interests and arranged, sponsored or de names of speakers and su	d policies sought divered speeches	to be influenced an	d the means employe	ed to achieve this pu	rpose. If the regis	trant
						•	
			·				
	•						
						•	
		•					
				· .			
13.	In addition to the above of foreign principal(s)?	lescribed activitie Yes	es, if any, have you No ⊠	engaged in activity	on your own behalf	which benefits you	ı
	If yes, describe fully.	•			•		
	ir yes, describe furly.						
					,		
			•				

⁵ The term "political activity" means any activity that the person engaging in believes will, or that the person intends to, in any way influence any agency or official of the Government of the United States or any section of the public within the United States with reference to formulating, adopting or changing the domestic or foreign policies of the United States or with reference to political or public interests, policies, or relations of a government of a foreign country or a foreign political party.

IV - FINANCIAL INFORMATION

4. (a)	RECEIPTS-MONIES During this 6 month reporting period statement, or from any other source money either as compensation or or or other sources.	e, for or in the interests				
	If no, explain why.					
	If yes, set forth below in the require	ed detail and separatel	y for each fo	reign principal a	n account o	f such monies. ⁶
	Date From SEE ATTACHED	Whom		Purpose		Amount
	•					
					-	
				÷		
						\$209
	the season				•	Total
. (b)	RECEIPTS - FUNDRAISING C During this 6 month reporting period foreign principal named in Items 7	od, have you received,	_	fundraising cam	paign ⁷ , any i No ⊠	money on behalf of any
	If yes, have you filed an Exhibit D	to your registration?		Yes	No □	
	If yes, indicate the date the Exhibit	D was filed. Da	ite			
(c)	RECEIPTS-THINGS OF VALU During this 6 month reporting perionamed in Items 7, 8, or 9 of this sta Yes \(\subseteq \text{No } \text{ No } \text{ \text{\text{\text{N}}}}	od, have you received				
	If yes, furnish the following inform	nation:				
	Foreign Principal	Date Received		Thing of Value	٠	Purpose

^{6, 7} A registrant is required to file an Exhibit D if he collects or receives contributions, loans, moneys, or other things of value for a foreign principal, as part of a fundraising campaign. (See Rule 201(e)).

⁸ An Exhibit D, for which no printed form is provided, sets forth an account of money collected or received as a result of a fundraising campaign and transmitted for a foreign principal.

⁹ Things of value include but are not limited to gifts, interest free loans, expense free travel, favored stock purchases, exclusive rights, favored treatment over competitors, "kickbacks," and the like.

	%					(PAGE
. (a)		porting period, have you ded monies in connection with act	ivity on behalf of an	y foreign principal	named in I	tems 7, 8, or
	(2) transmitted monies	s to any such foreign principal?	Yes 🗆	No 🗵		٠
	If no, explain in full de	tail why there were no disbursemen	nts made on behalf o	f any foreign princ	cipal.	
		n the required detail and separately my, to each foreign principal.	for each foreign pri	ncipal an account	of such mor	nies, includir
	Date	To Whom	Pur	pose	A	mount
	SEE ATTACHED)

\$19,574

Total

/D	٨	GE.	7)
ıΓ	$^{-}$	UL	. / 1

		Yes 🗆	No 🗵						
	If yes, furnish t	the following infor	mation:						
	Date	Recipient	1	Foreign Principa	ıl	Thing o	f Value	Purp	ose
		·.	•	•					•
				· · · · · · · · · · · · · · · · · · ·				,	*
•									
				٠		,			
(c)	During this 6 n other person, n	ENTS-POLITICATION TO THE POLITICATION TO THE P	riod, have yo ions of mone	u from your ow y or other thing	s of value 11 in	n connect	ion with an e	lection to any	political
٠.		Yes 🗆	No 🗵					_	
	If yes, furnish	the following infor	mation:	, , , , , ,					
	Date	Amount o	r Thing of V	alue P	olitical Orga	nization o	r Candidate	Location	of Event

^{10, 11} Things of value include but are not limited to gifts, interest free loans, expense free travel, favored stock purchases, exclusive rights, favored treatment over competitors, "kickbacks" and the like.

V-INFORMATIONAL MATERIALS

16. (a) During this 6 month reporting period Yes ⊠ No □	od, did you prepare, disseminate or cause to be	disseminated any informational materials? ¹¹
If Yes, go to Item 17.		.*
· -	lo you disseminate any material in connection v	with your registration?
Yes □ No □	•	
If Yes, please forward the materials dis	seminated during the six month period to the R	egistration Unit for review.
 Identify each such foreign principal. THE GOVERNMENT OF ST. MAARTEN, I 	NETHERLANDS, ANTILLES	
	•	•
		•
18. During this 6 month reporting period, h	as any foreign principal established a budget o	r allocated a specified sum of money to
finance your activities in preparing or o		Yes ⊠ No □
	pal, specify amount, and indicate for what peri \$209 (JANUARY 1, 2012 - JUNE 30, 2012)	od of time.
		•
,		
materials include the use of any of the	ine or newspaper	r causing the dissemination of informationa Letters or telegrams ications Lectures or speeches
Electronic Communications		
☐ Email		
⊠ Website URL(s): www.st-maarten.com	1	
Other (specify)	·	
20. During this 6 month reporting period, of the following groups:	lid you disseminate or cause to be disseminated	l informational materials among any of
☐ Public officials	☐ Newspapers	☐ Libraries
☐ Legislators	☐ Editors	☐ Educational institutions
☐ Government agencies	☐ Civic groups or associations	☐ Nationality groups
☑ Other (specify) TRADE SHOWS/	GENERAL PUBLIC	
21. What language was used in the information	ational materials:	
⊠ English	Other (specify)	
· · · · · · · · · · · · · · · · · · ·	, U.S. Department of Justice a copy of each iter	
disseminated or caused to be dissemina	ated during this 6 month reporting period?	Yes □ No ⊠
23. Did you label each item of such inform Yes ⊠ No □	national materials with the statement required by	y Section 4(b) of the Act?

¹² The term informational materials includes any oral, visual, graphic, written, or pictorial information or matter of any kind, including that published by means of advertising, books, periodicals, newspapers, lectures, broadcasts, motion pictures, or any means or instrumentality of interstate or foreign commerce or otherwise. Informational materials disseminated by an agent of a foreign principal as part of an activity in itself exempt from registration, or an activity which by itself would not require registration, need not be filed pursuant to Section 4(b) of the Act.

VI - EXECUTION

In accordance with 28 U.S.C. § 1746, the undersigned swear(s) or affirm(s) under penalty of perjury that he/she has (they have) read the information set forth in this registration statement and the attached exhibits and that he/she is (they are) familiar with the contents thereof and that such contents are in their entirety true and accurate to the best of his/her (their) knowledge and belief, except that the undersigned make(s) no representation as to truth or accuracy of the information contained in the attached Short Form Registration Statement(s), if any, insofar as such information is not within his/her (their) personal knowledge.

(Date of signature)	(Print or type name under each signature or provide electronic signature
6/21/2012	A=Richardson
	A E Richardson
	·

¹³ This statement shall be signed by the individual agent, if the registrant is an individual, or by a majority of those partners, officers, directors or persons performing similar functions, if the registrant is an organization, except that the organization can, by power of attorney, authorize one or more individuals to execute this statement on its behalf.

1:48 PM 07/05/12 Accrual Basis

St. Maarten Tourist Office Profit & Loss

January through June 2012

	Jan - Jun 12
Income Income	
Home Office Direct	209.00
Total Income	209.00
Total Income	209.00
Expense Management & General	
Accounting Expense	4,308.75
Office Expense	442.79
Rent Expense	2,100.82
Total Management & General	6,852.36
Program Services	
Fulfillment Services	11,015.60
Total Program Services	11,015.60
Taxation	1,915.00
Total Expense	19,782.96
Net Income	-19,573.96

St. Maarten Tourist Office Profit & Loss Detail January through June 2012

Туре	Date	Num	Adj	Name	Memo	Clr	Split	Debit	Credit	Balance
Income Income Home Office Direct										
General Journal 1/	/13/2012	56 ·		Slate, Tenaglia, Frit			St.Maarten Isl		209.00	209.00
Total Home Office Di	irect							0.00	209.00	209.00
Total Income		,					-	0.00	209.00	209.00
Total Income		· .	•					0.00	209.00	209.00
Expense										
Management & Genera Accounting Expens										
	/25/2012	155667		Janover LLC	No.		Accounts Pay	397.50		397.50
	/30/2012	_		Janover LLC			Accounts Pay	1,776.25	*	2,173.75
	/23/2012	State	•	Janover LLC			Accounts Pay	915.00		3,088.75
	/5/2012	31/12		US Dept of Justice			Accounts Pay	305.00		3,393.75
	/5/2012	30/6/12		Dept of Justice	A STATE OF THE STA		Accounts Pay	305.00		3,698.75
	/5/2012 /5/2012	31/12 30/6/12		US Dept of Justice US Dept of Justice			Accounts Pay Accounts Pay	305.00 305.00		4,003.75 4,308.75
Total Accounting Exp	ense							4,308.75	0.00	4,308.75
Office Expense Bill 2/	2/2012			Poland Spring Direct			Accounts Pay	442.79		442.79
Total Office Expense							- -	442.79	0.00	442.79
Rent Expense							•			
	1/2012			Dolp 675 Proper.			Accounts Pay	325.00	•	325.00
	1/2012			Dolp 675 Proper.	•		Accounts Pay	16.25		341.25
Bill 2/	1/2012			Dolp 675 Proper.		•	Accounts Pay	325.00		666.25
Bill 2/	1/2012			Dolp 675 Proper.			Accounts Pay	16.25		682.50
Bill 3/	1/2012	2203		Dolp 675 Proper.			Accounts Pay	341.25		1,023.75
Bill 4/	11/2012	1099		Bank of New York			Accounts Pay	53.32		1,077.07
Bill 5/	1/2012	April/		Dolp 675 Proper.			Accounts Pay	1,023.75		2,100.82
Total Rent Expense							·	2,100.82	0.00	2,100.82
Total Management & Ge	neral				•			6,852.36	0.00	6,852.36
Program Services Fulfillment Services	•									
	15/2012	188		Excelsior Intergrate	•		Accounts Pay	2,220.30		2,220,30
	31/2012	248	,	Excelsior Intergrate		•	Accounts Pay	140.22		2,360.52
	29/2012	331		Excelsior Intergrate			Accounts Pay	4.083.60		6,444.12
	15/2012	364	•	Excelsior Intergrate	•		Accounts Pay	4,231.76		10,675.88
	31/2012	426		Excelsior Intergrate			Accounts Pay	339.72		11,015.60

1:47 PM

07/05/12

Accrual Basis

St. Maarten Tourist Office Profit & Loss Detail January through June 2012

Туре	Date	Num	Adj	Name	Memo	Clr	Split	Debit	Credit	Balance
Total Program Se	rvices							11,015.60	0.00	11,015.60
Taxation Bill Bill	1/24/2012 3/30/2012			Dept. of Taxation & Janover LLC			Accounts Pay Accounts Pay	1,000.00 915.00		1,000.00 1,915.00
Total Taxation								1,915.00	0.00	1,915.00
Total Expense							_	19,782.96	0.00	19,782.96
Net Income							_	19,782.96	209.00	-19,573.96